

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
JOHN MCCAIN 2008, INC.

A. Full Name (Last, First, Middle Initial) MRS. RHODORA FREYVOGEL NOETHLING Mailing Address 1001 LIBERTY AVENUE SUITE 850 City State Zip Code PITTSBURGH PA 15222-3718 FEC ID number of contributing federal political committee. Name of Employer EDUCATIONAL COACHING Occupation EXECUTIVE Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4600.00	Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8 Amount of Each Receipt this Period 2300.00 CONTRIBUTION REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) Transaction ID: SA17.693694
B. Full Name (Last, First, Middle Initial) MRS. RHODORA FREYVOGEL NOETHLING Mailing Address 1001 LIBERTY AVENUE SUITE 850 City State Zip Code PITTSBURGH PA 15222-3718 FEC ID number of contributing federal political committee. Name of Employer EDUCATIONAL COACHING Occupation EXECUTIVE Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4600.00	Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8 Amount of Each Receipt this Period 2300.00 CONTRIBUTION REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) Transaction ID: SA17.693695
C. Full Name (Last, First, Middle Initial) MR. THOMAS M. FREYVOGEL, III Mailing Address 1001 LIBERTY AVENUE SUITE 850 City State Zip Code PITTSBURGH PA 15222-3718 FEC ID number of contributing federal political committee. Name of Employer Occupation STUDENT Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4600.00	Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8 Amount of Each Receipt this Period 2300.00 CONTRIBUTION REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) Transaction ID: SA17.693610

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)